



PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/612,915
	Filing Date	July 7, 2003
	First Named Inventor	Duncan F. Campbell
	Art Unit	3611
	Examiner Name	not yet assigned
Total Number of Pages in This Submission	Attorney Docket Number	149-13

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> -Form 1449A/PTO -12 U.S. patent references -acknowledgment of receipt card
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Timothy J. Sinnott, Registration No. 31,083
Signature	
Date	October 6, 2003

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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October 6, 2003

Timothy J. Sinnott B.S., M.Sc. (Phys.), LL.B.  
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Your Reference: 10/612,915

Our Reference: 149-13

## INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia  
U.S.A. 22313-1450

Dear Sir:

**Re: Patent Application No. 10/612,915**  
**Filing Date: July 7, 2003**  
**Applicant: Duncan F. Campbell**  
**Group Art Unit: 3611**

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In accordance with 37 CFR sub. s. 1.97 and 1.98, and in recognition of the duty of disclosure set forth in 37 CFR s. 1.56, Applicant hereby submits a Form 1449A/PTO disclosing information which the Examiner may consider to be material to the examination of the above-referenced application. Copies of the documents referred to therein are enclosed.

The Applicant reserves the right to contest the applicability of any of these documents as prior art against the subject application.

Please make these references of record and take them into account in the initial examination of this application.

Respectfully submitted,

Timothy J. Sinnott  
Reg. No. 31,083  
/hs  
Encl.

please send your reply to:

Scotia Plaza, 40 King Street West, 40th Floor  
Toronto, Ontario, Canada M5H 3Y2  
416 364 7311 fax: 416 361 1398

Meadowvale Corporate Centre, 2000 Argentia Road  
Plaza 4, Suite 430, Mississauga, Ontario, Canada L5N 1W1  
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PTO/SB/08b(08-03)

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Substitute for form 1449B/PTO

**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Sheet

of

**Complete if Known**

Application Number

Filing Date

First Named Inventor

Art Unit

Examiner Name

Attorney Docket Number

**NON PATENT LITERATURE DOCUMENTS**

Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

Examiner  
Signature

Date

Considered

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

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